



FOR OFFICE USE ONLY
Plan. File #
Bldg. File #
Eng. File #

## MONROE FIRE DEPARTMENT

163 Village Court • Monroe, WA 98272 Phone: (360) 794-7666 • Fax: (360) 794-0959

## **COMMUNITY DEVELOPMENT / ENGINEERING** 806 West Main Street • Monroe, WA 98272

Phone: (360) 794-7400 • Fax: (360) 794-4007

## **CITY OF MONROE** – Combined Permit Application

	Permit Submittal Hours	Monday through Friday:	
	Building, Fire & Land Use permi Engineering permi	•	om & 2:00 pm – 4:00 pm n
Building  Building (new construction)  Commercial T/I  Demolition  Garage/Carport  Mechanical  Plumbing  Residential Remodel  Sign  Other  *Please note that all requissued by the Dept. of La	Engineering  Engineering Review  Fencing Grading Retaining wall Rockery Right-of-Way Disturbance Special Flood Hazard Area Utility Service	Fire  Fire Alarm  Fire Sprinkler  High Piled Storage  Hood Suppression  Spray Booth  Tents & Canopies  Other	Land Use  ☐ Accessory Dwelling Unit ☐ Boundary Line Adjustment /Lot Consolidation ☐ Conditional/Special Use ☐ Land Clearing/Forest Practices ☐ Planned Residential Development ☐ Shoreline Permit ☐ Short Plat ☐ Subdivision/Plat ☐ Variance ☐ Other ☐ Other
	ation: 13611-197 <sup>th</sup> Ave. S.E. Monr		MITTAL REQUIREMENTS
Size of site (acre/square fee	t): 1,526,271 Square Feet or 35.03	3 Acres	
Assessor's Tax Parcel Num	, , ,	•	·
	203300,28073100203400,2807310	00201100,2807310020320	0,28073100204000,0101030005
200 &01010300050100			
Applicant: RAD DEVELOPM Signature: (1997)	ENT CFO	Phone # ( <u>425</u> ) Printed Name:	299-2600 Douglas R Wrigle;
Mailing Address:16531 13 <sup>TH</sup>	AVENUE W. # A 107	Fax # () _	
City LYNWOOD	State WA Zip 98	8037 E-mail CBPIER	CE@COMCAST.NET
Property Owner: RAD DEVE *Signature: Malling Address: SAME	LOPMENT CRO	Phone # ( <u>425</u> Printed Name: Fax # ()	) 299-2600 Doughs R Wrigley
City SAME	State SAME Zip S		,
ATTACH A	SEPARATE SHEET FOR ADDITIONAL P	ROPERTY OWNERS/ADDITION	AL ADDRESSES

<sup>\*</sup>Applicant: By your signature above, you hereby certify that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf.

<sup>\*\*</sup>Property Owner(s): By your signature above, you hereby certify that you have authorized the above Applicant to make application on your behalf for this application.





## **Combined Permit Application - Page 2**

Contractor:	Phone #				
Contractor's License #	Exp Date				
Mailing Address					
Contractor's Bond Company:					
Contractor's Bid Amount or Project Cost (labor and materials): \$					
Forest Tax Reporting Account Number (if harvesting timber call the Department of Revenue at					
(800) 548-8829 for tax reporting information or to receive a tax number):					
Detailed description of proposal/wo	ork:				
	ODE WE ARE SUBDIVIDING 35.03 ACRES INTO 146 SINGLE FAMILY LOTS.				
Lending Institution for project (if appli	icable):				
FOR OFFICE USE ONLY					
Planning Application Fee: 9 Fire Plan Check Fee: 9 SEPA Fee: 9					